				Docket No.:	Q	
DECLARATION AND POWER	OF ATTORNEY FO	OR UTILITY OR	DESIGN PATENT	APPLICATION (3	7 CFR 1.63)	
As a below named inventor, I hereby d I believe I am the original, first and s names are listed below) of the subject PHOTOMASK AND	leclare that: My resi ole inventor (if only matter which is clain	dence, mailing add one name is listed med and for which	ress, and citizenship a I below) or an origina A patent is sought on t	are as stated below n	ext to my name.	
FROTOMASK AND	IMAGE DEVICE I	MIOTACIONING	mainob		<del></del>	
the application of which is attached hereto	OR	as United States		or PCT Internationation, and was amend		
			(if applicable).			
I hereby state that I have reviewed an by any amendment specifically referre	d understand the cored to above.	ntents of the above	identified application	n, including the clair	ns, as amended	
I acknowledge the duty to disclose continuation-in-part application(s), m the national or PCT international filing	aterial information v g date of the continu	which became avai ation-in-part applic	able between the fili ation.	ng date of the prior	application and	
I hereby claim foreign priority under breeder's rights certificate(s), or 365( United States of America, listed belo inventor's or plant breeder's rights of application on which priority is claims	a) of any PCT inten ow and have also id certificate(s), or any	national application entified below, by	n(s) which designated checking the box, as	l at least one country ny foreign application	y other than the on(s) for patent,	
				Priority (	Claimed	
Prior Application Number(s)	Count	ry	Filing Date	Yes	No	
2003-370938	Japa	n ·	October 30, 2003	X		
			<del></del> -			
				(continued or		
					n page 3)	
I hereby claim benefit under 35 Unite	d States Code §119(	e) of any United St	ates provisional appli			
	d States Code §119( pplication Number(s)	e) of any United St	ates provisional appli Filing Da	cation(s) listed belov		

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

Prior U.S. or International Application Number(s)

U.S. or International Filing Date

Status

WASHINGTON OFFICE 23373

CUSTOMER NUMBER

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:						
Given Name (first and middle [if any]) YOSHINORI Family Name or Surname IWANAGA						
Inventor's Signature	永義僚	r	Date April 26, 2006			
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Mailing Address: 1-3-17, Hotakubo						
City Kumamoto-shi	State Kumamoto	Zip	Country Japan			
NAME OF SECOND INVENTOR:						
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature		<u></u>	Date			
Residence: City	State	Country	Citizenship			
Mailing Address:						
City	State	Zip	Country			
NAME OF THIRD INVENTOR:						
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address:						
City	State	Zip	Country			
NAME OF FOURTH INVENTOR:						
Given Name (first and middle [if anyl) Family Name or Surname						
(first and middle [if any])						
Inventor's Signature	<b>-</b>		Date			
Residence: City	State	Country	Citizenship			
Mailing Address:						
City	State	Zip	Country			
NAME OF FIFTH INVENTOR:						
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature			Date			
Residence: City	State	Country Citizenship				
Mailing Address:						
City	State	Zip	Country			
NAME OF SIXTH INVENTOR:						